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Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727077 (0)

1. Corporation Name
FLORIDA FLY ROD CLUB, INC.

Principal Place of Business	Mailing Address
150-D FORTENBERRY ROAD P.O. BOX 1766 MERRITT ISLAND FL 32952-3411	150-D FORTENBERRY ROAD P.O. BOX 1766 MERRITT ISLAND FL 32952-3681

3. Date Incorporated or Qualified: 07/31/1973
3a. Date of Last Report: 04/05/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: 59-3020496 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STAHLEY, EDWARD L.
150-D FORTENBERRY ROAD
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	MCCALLISTER, GLENN		1.2 NAME	TURNER, BILL	
STREET ADDRESS	262 E MERRITT IS CAUSEWAY SUITE 19		1.3 STREET ADDRESS	200 WARING WAY	
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32952	
TITLE	SD	☐ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	STAHLEY, EDWARD L		2.2 NAME	KNUCKLES, BRENT	
STREET ADDRESS	150-D FORTENBERRY RD		2.3 STREET ADDRESS	1100 JOHN RODES BLVD, LOT 18	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000		2.4 CITY-ST-ZIP	MELBOURNE, FL 32934	
TITLE	SD	☐ DELETE	3.1 TITLE	TD	☐ Change ☒ Addition
NAME	TAYLOR, RON		3.2 NAME	OEITHORN, DAVID A.	
STREET ADDRESS	995 NEWFOUND HARBOR DR		3.3 STREET ADDRESS	457 N. WATERWAY DR	
CITY-ST-ZIP	MERRITT ISLAND FL		3.4 CITY-ST-ZIP	SATELLITE BEACH, FL 32937	
TITLE	VD	☒ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	TURNER, BILL		4.2 NAME		
STREET ADDRESS	~~2440 RAINTREE CIRCLE~~ 200 WARING WAY		4.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL 32952		4.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	THOMPSON, DICK		5.2 NAME		
STREET ADDRESS	630 HERON DRIVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [illegible] DAVID A. OEITHORN 3 APR 97 407-779-8681